

1 of 2

CLAIMS ONLY						Application Number 10/616,776	Filing Date			
						Applicant(s)				
* May be used for additional claims or amendments										
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT					
	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend	Indep	Depend
1	3-30-05						51			
2							52			
3							53			
4							54			
5							55			
6							56			
7							57			
8							58			
9							59			
10							60			
11							61			
12							62			
13							63			
14							64			
15							65			
16							66			
17							67			
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30							80			
31							81			
32							82			
33							83			
34							84			
35							85		25	
36							86		25	
37							87			
38							88			
39							89			
40							90			
41							91			
42							92			
43							93			
44							94			
45							95			
46							96			
47							97			
48							98			
49							99			
50							100			
Total Indep							Total Indep			
Total Depend							Total Depend			
Total Claims							Total Claims			

2 of 2

CLAIMS ONLY						Application Number 10/616776	Filing Date					
						Applicant(s)						
* May be used for additional claims or amendments												
CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		Indep	Depend	Indep	Depend	Indep	Depend
	Indep	Depend	Indep	Depend	Indep	Depend						
101							151					
102							152					
103							153					
104							154					
105							155					
106							156					
107							157					
108							158					
109							159					
110							160					
111							161					
112							162					
113							163					
114							164					
115	1						165					
116							166					
117							167					
118							168					
119							169					
120							170					
121							171					
122							172					
123							173					
124							174					
125		10					175					
126		10					176					
127							177					
128							178					
129							179					
130		13					180					
131		13					181					
132		13					182					
133		25					183					
134							184					
135							185					
136							186					
137							187					
138							188					
139							189					
140							190					
141							191					
142							192					
143							193					
144							194					
145							195					
146							196					
147							197					
148							198					
149							199					
150							200					
Total Indep	1						Total Indep					
Total Depend	186						Total Depend					
Total Claims	187						Total Claims					